This report contains data through the week ending 5/18/2013 (MMWR week 20).



Overview of Influenza Surveillance: Surveillance for the 2012-2013 influenza season officially began on September 30, 2012. The Utah Department of Health publishes a weekly report throughout the active influenza season that synthesizes data from a variety of sources to give the most complete and up-to-date picture of influenza activity in the state of Utah. Data in this report should be considered provisional, and may change as more complete reports are recieved.

Influenza-like Illness (ILI): The U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) is a national system that conducts surveillance for influenza-like illness (ILI) in outpatient healthcare facilities. ILINet providers report weekly the total number of patients seen for any reason and the number of patients seen with ILI (defined as a fever ≥ 100° F and a cough or sore throat). These data are used to determine the amount of ILI circulating in the community, as well as provide insight into regional differences in ILI activity. Currently, more than 50 facilities throughout Utah participate in ILINet.

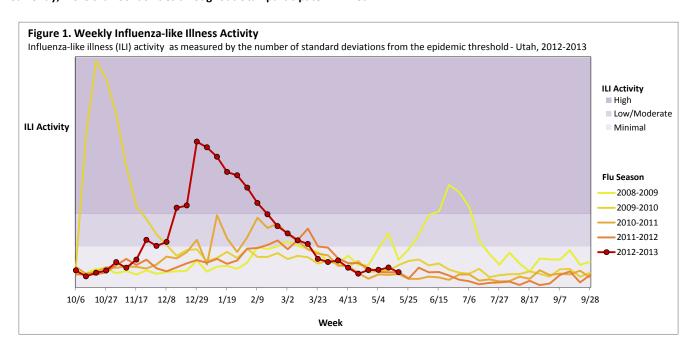


Table 1. Influenza-like Illness (ILI) Activity Levels by Health District - Utah, Current Week

Health District	ILI Activity
Bear River	Minimal
Central	Minimal
Davis	Minimal
Salt Lake	Minimal
Southeastern	No Data
Southwest	Minimal
Summit	Minimal
Tooele	Minimal
TriCounty	No Data
Utah	Minimal
Wasatch	Minimal
Weber-Morgan	Minimal
State	Minimal

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Influenza Hospitalizations: Influenza hospitalizations are a reportable condition in Utah. A person meets the case definition for an influenza hospitalization if they are hospitalized for any length of time and have an influenza positive serology, DFA, PCR, or culture test (confirmed case) or a positive rapid influenza diagnostic test (probable case). Public health in Utah gathers a variety of data on influenza hospitalizations including clinical features, course of illness, risk and protective factors, and influenza type and subtype. Data from influenza hospitalizations allows public health in Utah to better understand subgroups of the Utah population that are most severely affected by influenza and help to guide prevention messages and interventions.

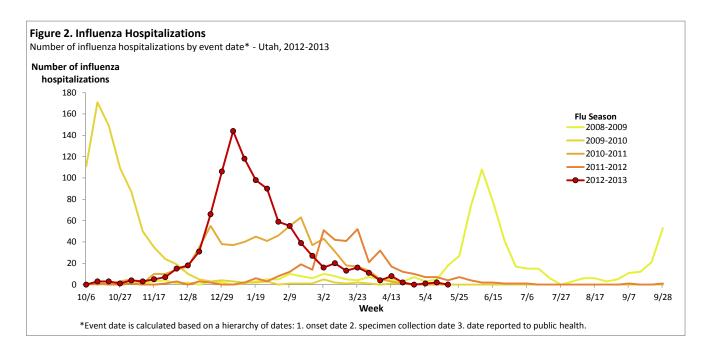


Table 2. Influenza Hospitalizations by Case Status - Utah

	Current Week		Season	To Date	te	
Case Status	Total %	of Cases	Total 9	6 of Cases		
Confirmed	0	0.0	926	94.0		
Probable	0	0.0	59	6.0		
Total	0	0.0	985	100.0		

Table 3. Influenza Hospitalizations by Health District - Utah

Health District	Current Week	Season To Date
Bear River	0	51
Central	0	42
Davis	0	74
Salt Lake	0	443
Southeastern	0	3
Southwest	0	106
Summit	0	14
Tooele	0	6
TriCounty	0	17
Utah	0	148
Wasatch	0	4
Weber-Morgan	0	77
State	0	985

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Table 4. Influenza Hospitalizations by Age Group - Utah, Season To Date

Age Group	Total Cases	% of Cases	Rate*
0-4	193	19.6	71.32
5-24	141	14.3	14.90
25-49	125	12.7	12.60
50-64	131	13.3	32.71
65+	395	40.1	159.93
Total	985	100.0	34.49

^{*}Rate is calculated as the number of cases per 100,000 population

Table 5. Influenza Hospitalizations by Sex and Race - Utah, Season To Date

Variab	le	Num. of Cases	% of Cases	% in Utah Pop p v	value*
Sex	Male	485	49.2	50.3 0).5043
	Female	499	50.7	49.7 0).5459
	Unknown	1	0.1	NA	
Race	White, Not Hispanic	769	78.1	82.0 0	0.0012
	Hispanic	135	13.7	11.6 0	0.0378
	Native Hawaiian/Pacific Islander	37	3.8	0.7 <0	0.0001
	Black/African American	18	1.8	0.9 0	0.0035
	American Indian	4	0.4	1.1 0	0.0313
	Asian	22	2.2	1.9 0	0.3983
	Unknown	0	0.0	NA	

^{*}If a p value is \leq 0.05, there is a significant difference between the percentage seen in influenza hospitalizations and the general Utah population.

Table 6. Summary Data for Influenza Hospitalizations - Utah, Season To Date

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	Yes		No		Unkno	wn	
Variable	Total %	of Cases	Total %	of Cases	Total %	of Cases	
ICU	161	16.3	792	80.4	32	3.2	
Ventilator	59	6.0	896	91.0	30	3.0	
Died	34	3.5	925	93.9	26	2.6	
Neurological Symptoms	117	11.9	817	82.9	51	5.2	
Healthcare Worker	7	0.7	611	62.0	367	37.3	
Pregnant	32	3.2	946	96.0	7	0.7	
Heart Disorder	306	31.1	636	64.6	43	4.4	
Blood Disorder	25	2.5	914	92.8	46	4.7	
Kidney Disorder	88	8.9	852	86.5	45	4.6	
Metabolic Disorder	252	25.6	688	69.8	45	4.6	
Chronic Respiratory Disorder	293	29.7	652	66.2	40	4.1	
Immunosuppressed	95	9.6	840	85.3	50	5.1	
Neurological Disorder	117	11.9	817	82.9	51	5.2	
Seizure Disorder	37	3.8	905	91.9	43	4.4	
Bacterial Co-infection	20	2.0	918	93.2	47	4.8	
Obese*	200	30.8	327	50.4	122	18.8	
Morbidly Obese*	43	6.6	484	74.6	122	18.8	
Risk Factor†	891	90.5	94	9.5	0	0.0	
Vaccinated	365	37.1	453	46.0	167	17.0	

^{*}Obesity and morbid obesity is not considered for individuals under 18 years or pregnant women. Thus total counts will not equal the total number of influenza-associated hospitalizations

[†]Risk factors for influenza include: persons < 5 years, persons ≥ 65 years, pregnant women, and persons with a chronic medical condition.

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Student Absenteeism: School-age children are at high risk for respiratory virus infections, including influenza. Aggregate, all-cause absenteeism data is collected weekly from over 350 schools throughout Utah. These data are analyzed to identify elevated absenteeism rates that could indicate the circulation of influenza in school-age children.

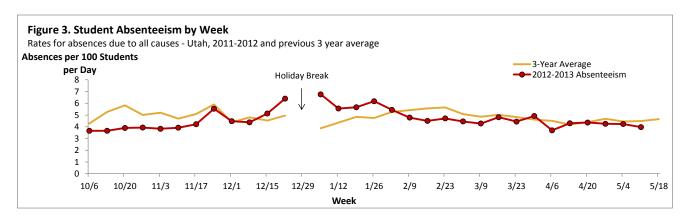
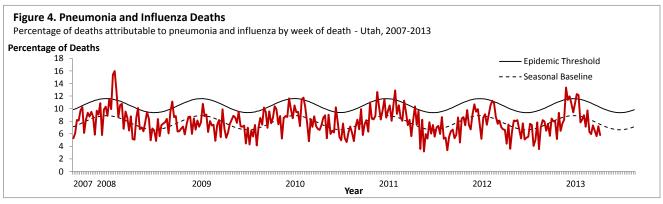


Table 7. Weekly Student Absenteeism - Utah, Current Week

Health District	Absences per 100
	students/day
Bear River	3.5
Central	3.6
Davis	3.1
Salt Lake	3.5
Southeast	6.0
Southwest	4.3
Summit	3.8
Tooele	5.1
TriCounty	4.8
Utah	1.7
Wasatch	3.8
Weber-Morgan	5.5
State	4.0

Pneumonia and Influenza Deaths: Each week the total number of death certificates received and the number of those for which pneumonia or influenza was listed as an underlying or contributing cause of death is collected. The percentage of deaths due to pneumonia and influenza are compared with a seasonal baseline and epidemic threshold value calculated for each week. These data are used to monitor the severity of influenza illness in the community.



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Laboratory Surveillance: The Unified State Laboratory: Public Health recieves specimens from all over the state for comprehensive influenza testing. All specimens are tested to determine influenza type and subtype. A portion of specimens are also sent to the Centers for Disease Control and Prevention for additional testing, including gene sequencing, antiviral resistance testing and antigenic characterization.

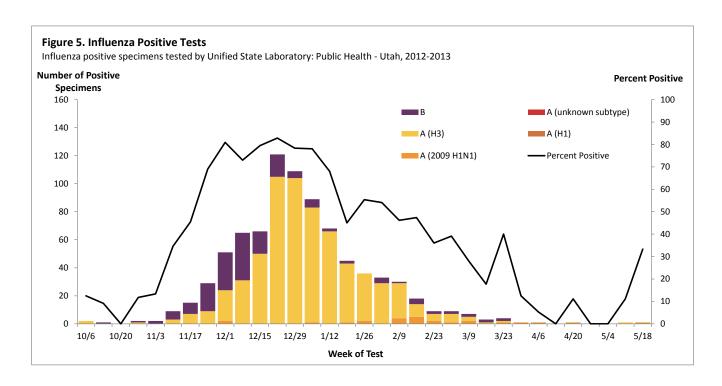


Table 8. Unified State Laboratory: Public Health Influenza Testing Data

	Current Week		Season	To Date		
	Total	Percent	Total	Percent		
Specimens tested	3		1,405			
Positive specimens	1	33.3	828	58.9		
Positive Specimens by Type/Subtype						
Influenza A	1	100.0	663	80.1		
A (2009 H1N1)	1	100.0	25	3.8		
A (H1)	0	0.0	0	0.0		
A (H3)	0	0.0	638	96.2		
A (unable to subtype)	0	0.0	0	0.0		
Influenza B	0	0.0	165	19.9		